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Bib Data Sheet

SERIAL NUMBER 10/660,944	FILING DATE 09/12/2003 RULE	CLASS 052	GROUP ART UNIT 3635	ATTORNEY DOCKET NO.						
APPLICANTS Daniel D. Dunn, Honeyville, UT; David C. Dunn, Honeville, UT;										
** CONTINUING DATA ***** This application is a CIP of 09/803,205 03/09/2001 PAT 6,647,686 OK <i>YMH</i>										
** FOREIGN APPLICATIONS ***** OK <i>YMH</i>										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 12/04/2003										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;"> Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged </td> <td style="width: 20%; border-bottom: 1px solid black;"> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>YMH</i> Initials </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> STATE OR COUNTRY UT </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> SHEETS DRAWING 18 </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> TOTAL CLAIMS 9 </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> INDEPENDENT CLAIMS 3 </td> </tr> </table>					Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>YMH</i> Initials	STATE OR COUNTRY UT	SHEETS DRAWING 18	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 3
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ADDRESS 28409 DANIEL D. DUNN P.O. BOX 308 HONEYVILLE , UT 84314										
TITLE Reinforced composite system for constructing insulated concrete structures										
FILING FEE RECEIVED	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td style="width: 40%; border: 1px solid black; padding: 5px;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) </td> </tr> </table>				FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)				
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